DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"A knead	ding machine f r fo	d doughs, particularly for b	akery produ	cts"	
the application of which					
the application of which X is attached hereto	O.B.	D			
A is attached hereto	OR	□ was filed on			
		as United States Applicatio Number	n Number or	PCT Internati	onal Application
		(Confirmation No.	(if appl), and was am licable).	ended on
I hereby state that I have reviewed an by any amendment specifically referre	d understand the cored to above.	ntents of the above identified a	pplication, in	cluding the cl	aims, as amende
I acknowledge the duty to disclose continuation-in-part application(s), m the national or PCT international filing	ateriai iiitottiiatton v	VIIICII DECAME AVAIIANIE Netwee	as defined in n the filing d	n 37 CFR 1	56, including foor application and
breeder's rights certificate(s), or 365(a United States of America, listed belo inventor's or plant breeder's rights or application on which priority is claime Prior Application Number(s)	ertificate(s), or any	PCT international application	e box, any fo (s) having a	reign applicat filing date b Priority	ion(s) for patent efore that of the Claimed
TO2002A001020	ITALY			Yes X	N ₀
I hereby claim benefit under 35 United App	States Code §119(e)	•	nal application	n(s) listed belo	ow.
hereby claim benefit under 35 Unite application(s) designating the United Stot disclosed in a listed prior United St United States Code, §112, I acknowled lefined in 37 C.F.R. 1.56 which occurriate of this application:	ates or PCT Internati	ional application in the manner	on(s) or §36 r of each of the provided by	ne claims of the the first parag	nis application is raph of Title 35,
Prior U.S. or International Application N	umber(s)	U.S. or International Filing Date		Stat	ns

I hereby appoint all attorneys of SUGHRUE MION, PLLC who are listed under the USPTO Customer Number shown below as my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.

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PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Attorney Docket No.:

Client Ref. No.

NAME OF SOLE OR FIRST INV	ENTOR:						
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(first and middle [if any]) Davide	Family Name or Surname DROCCO						
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Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature			Date				
Residence: City	State	Country		Citizenship			
Mailing Address:							
City	State	Zip		Country			
NAME OF THIRD INVENTOR:		· ·		- County			
Given Name (first and middle [if any]) Family Name or Surname							
Inventor's Signature			Date				
Residence: City	State	Country		Citizenship			
Mailing Address:							
City	State	Zip	Country				
NAME OF FOURTH INVENTOR:							
Given Name (first and middle [if any]) Family Name or Surname							
Inventor's Signature			Date				
Residence: City	State	Country	Citizenship				
Mailing Address:							
City	State	Zip		Country			
NAME OF FIFTH INVENTOR:							
Given Name first and middle [if any]) F		Family Name or Surname					
Inventor's Signature			Date				
Residence: City	State	Country		Citizenship			
Mailing Address:							